

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY
COMPANY
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

12 FEB 22 AM 11:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L09000095766

1. Limited Liability Company's Name

Chaney's Power Washing LLC
160 Kirby CR
HAVANA FL 32333

2. Principal Office Address - No P.O. Box #

160 Kirby CR

Suite, Apt. #, etc.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

HAVANA FL

City & State

Zip

32333

Country

Usken

Zip

32333

Country

4. State/Country of Formation

5. Date Organized or Qualified
To Do Business in Florida

6. FEI Number

36-4357089

☐ Applied For

☐ Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐

\$5.00 Additional Fee required
for a Certificate of Status

8. Name and Address of Current Registered Agent

Name

Ty Chaney

Street Address (P.O. Box Number is Not Acceptable)

160 Kirby CR

Suite, Apt. #, Etc.

1

City

HAVANA

State

FL

Zip Code

32333

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of
Registered Agent

Ty Chaney
REGISTERED AGENT MUST SIGN

Date 2-22-12

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
mbrm	Ty Chaney	160 Kirby CR	HAVANA FL 32333

11. E-mail Address Chaney's Power Washing @ G mail. com

12. I certify that I am a managing member/manager or the receiver or trustee empowered to execute this application as provided for in Chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s 817.155, F.S.

Signature of
Managing Member/Manager

Ty Chaney

Date 2-22-12

Daytime Phone # 850-566-9274

Typed or printed name of signing Managing Member/Manager